



4-14-04

David Andrew D'Zmura
P.O. Box 2541
Palm Desert, CA 92261

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I certify mailing by U.S.P.S. Express Mail
to the USPTO this date, April 13, 2004. *Joel John D'Zmura*

~~via Fax to (703) 305-6970~~, Attn: Office of Petitions, Mr. P. Shanoski, Esq.

Attn: Office of Petitions, Sr. Petitions Attorney Paul Shanoski:

Re: my Non-Provisional Utility Patent Application # 09/849,582

Sole Inventor: David Andrew D'Zmura (pro-se independent inventor)

Sole Applicant: David Andrew D'Zmura (pro-se independent inventor)

Sole Owner: David Andrew D'Zmura (pro-se independent inventor)

Filing Date: May 5, 2001

Title: Method of Determining Zodiac Signs

Attorney/Agent: None.

Renewed Petition under 37 CFR § 1.137 (a)

Dear U.S.P.T.O. Petitions Attorney Mr. Shanoski:

Thank you for your Decision communication, Paper No. 29, which you kindly faxed to me on April 1, 2004. Please be further advised, that the (a) mailed copy arrived last week, postmarked 2/13/04, containing a photocopy of the Decision, in an U.S.P.T.O. ^{envelope} stamped by the U.S.P.S. as "Received Unsealed at Palm Desert, CA 92260" and was unsealed.

April 11, 2004

Commissioner for Patents
Attn: Office of Petitions

As you are probably aware, under U.S. Federal and California State and Local laws, I have the right to receive my mail unopened, and there is no right or law affording any party access to, theft or copying of, my mail. I understand further, that there are U.S.P.T.O. Federal laws protecting my communications to and from the U.S.P.T.O., guaranteeing and enforcing my rights to confidentiality. Every piece of mail from the U.S.P.T.O. to me is being a) stolen, b) opened, c) withheld and/or delayed, and/or d) copied, tampered, and/or vandalized. I ask that the U.S.P.T.O. enforce my rights to confidential communication and punish the offending parties. I have brought the matter of the theft and tampering of my mail to U.S. Postal Inspector Sam Mauldin, in the U.S.P.I.S. San Bernardino office already a year ago. As you are probably aware, during and throughout the preparation, filing, administration and prosecution of my patent application #09/849,582 - and, of my patent applications (well over 30 at the U.S.P.T.O.) more generally - I am a pro-se independent inventor (and pro-se independent author of my specifications, drawings and claims, and correspondences/ amendments, petitions, etc.), and I do not have, and have not had, any associate, colleague, attorney, agent, partner, investor, consultant, CPA, or designee/executor respective my applications, or respective my inventions and intellectual property more generally. I own my inventions 100%, and have never sold, transferred, granted, hypothecated, assigned or permitted any entitlement, permission, ownership, participation or usage to any party, person or entity ever.

April 11, 2004

Commissioner for Patents

Attn: Office of Petitions

⑦ My outstanding bills, including fees to U.S.P.T.O. for the maintenance, examination, and prosecution of my applications, exceeds the money I have. Also, re my 2003 1040, my W-2 income (ref. line 7, 1040, of \$1,027.84) I earned in January 2003, and spent prior to June 2003.

⑧ Not having any bank account since my Bank of America checking account, I opened a personal, individual, savings account for myself, at Downey Savings on 2/12/04, using my IRS refund as opening deposit.

Petitions Attorney Shanski, thank you for speaking with me by phone on April 5, 2004, regarding my preparation of my renewed petition. As I briefly related my circumstances to you, you indicated that my Renewed Petition under 37 CFR § 1.137(a) will be (probably) accepted/granted, provided my provision of the two documents which I am enclosing/attaching to this Renewed Petition: a) my 2003 1040 tax return; b) medical statement. You indicated the medical statement should be brief, and it is. I am also attaching proof of my mailing of my 2003 1040 personal income tax return, which, as always, I prepare and file by myself, for myself.

Of further note, since the sale of my car, and the couple of small checks/refunds I received later last year (which I cited in my last Renewed Petitions), I have had no income or money, with one single exception. On February 10, 2004, I received an IRS refund on my 1999 taxes paid, of \$1644.¹¹. This refund was issued to me, based upon my 1040X's (1997-2001) which I filed, 9/25/03, necessitated by my 2002 NOL of \$7.4M. Per the IRS, my 1040X's were processed, entered and accepted as I prepared them, with a \$6 difference in my 1999 refund due. I have used over half these funds (1999 refund) since then.¹²

On 3/22/04, I left (and moved out) of my rented apartment, at 78650 Avenue 42, Apt. 810; Bermuda Dunes, CA 92201. I now reside at: c/o Milestones; 82-485 Miles Ave.; Indio, CA 92201. I have, and have had, no other residence or physical address or "business location". During my year-long residency at my former apartment, I was robbed, stalked, terrorized and poisoned (as were my cats) each and every month.

Sincerely,

David Andrew D'Zurura

[un-bridged]
(un-bridged)

enc. my 2003 1040 personal income tax filing;
medical statement fr. Oasis/Dr. Bessanelli;
proof of mailing (U.S.P.S) receipt 2003 1040;
change of address; Downey Savings (my savings book).

Tax and Credits**Standard Deduction for—**

- People who checked any box on line 36a or 36b or who can be claimed as a dependent, see page 34.
- All others:

Single or Married filing separately, \$4,750

Married filing jointly or Qualifying widow(er), \$9,500

Head of household, \$7,000

35	Amount from line 34 (adjusted gross income)	35	\$17,964,005 (-)
36a	Check <input type="checkbox"/> You were born before January 2, 1939, <input type="checkbox"/> Blind. Total boxes if: <input type="checkbox"/> Spouse was born before January 2, 1939, <input type="checkbox"/> Blind. checked ► 36a	36	0
b	If you are married filing separately and your spouse itemizes deductions, or you were a dual-status alien, see page 34 and check here ► 36b	36b	<input type="checkbox"/>
37	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	37	4,750
38	Subtract line 37 from line 35	38	(17,968,755)
39	If line 35 is \$104,625 or less, multiply \$3,050 by the total number of exemptions claimed on line 6d. If line 35 is over \$104,625, see the worksheet on page 35	39	3,050
40	Taxable income. Subtract line 39 from line 38. If line 39 is more than line 38, enter -0-	40	-0-
41	Tax (see page 36). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	41	-0-
42	Alternative minimum tax (see page 38). Attach Form 6251	42	-0-
43	Add lines 41 and 42	43	-0-
44	Foreign tax credit. Attach Form 1116 if required	44	-0-
45	Credit for child and dependent care expenses. Attach Form 2441	45	-0-
46	Credit for the elderly or the disabled. Attach Schedule R	46	-0-
47	Education credits. Attach Form 8863	47	-0-
48	Retirement savings contributions credit. Attach Form 8880	48	-0-
49	Child tax credit (see page 40)	49	-0-
50	Adoption credit. Attach Form 8839	50	-0-
51	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859	51	-0-
52	Other credits. Check applicable box(es): a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Specify	52	-0-
53	Add lines 44 through 52. These are your total credits	53	-0-
54	Subtract line 53 from line 43. If line 53 is more than line 43, enter -0-	54	-0-

Other Taxes

55	Self-employment tax. Attach Schedule SE
56	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137
57	Tax on qualified plans, including IRAs, and other tax-favored accounts. Attach Form 5329 if required
58	Advance earned income credit payments from Form(s) W-2
59	Household employment taxes. Attach Schedule H
60	Add lines 54 through 59. This is your total tax ►

Payments

If you have a qualifying child, attach Schedule EIC.

61	Federal income tax withheld from Forms W-2 and 1099	61	21 08
62	2003 estimated tax payments and amount applied from 2002 return	62	-0-
63	Earned income credit (EIC)	63	-0-
64	Excess social security and tier 1 RRTA tax withheld (see page 56)	64	-0-
65	Additional child tax credit. Attach Form 8812	65	-0-
66	Amount paid with request for extension to file (see page 56)	66	-0-
67	Other payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	67	-0-
68	Add lines 61 through 67. These are your total payments ►	68	21 08

Refund

Direct deposit? See page 56 and fill in 70b, 70c, and 70d.

69	If line 68 is more than line 60, subtract line 60 from line 68. This is the amount you overpaid	69	21 08
70a	Amount of line 69 you want refunded to you ►	70a	21 08
b	Routing number	c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
d	Account number		

71 Amount of line 69 you want applied to your 2004 estimated tax ► 71 -0-

Amount You Owe

72 Amount you owe. Subtract line 68 from line 60. For details on how to pay, see page 57 ► 72 -0-

73 Estimated tax penalty (see page 58) 73

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see page 58)? Yes. Complete the following. No

Designee's name ► ~~none~~ Phone no. ► ~~none~~ Personal identification number (PIN) ►

Sign Here

Joint return? See page 20.

Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature Dolores G. T. 	Date 4/9/04	Your occupation: self-employed pro-se independent inventor and author	Daytime phone number (760)347-9022
Spouse's signature. If a joint return, both must sign. none	Date	Spouse's occupation	

Paid Preparer's Use Only

Preparer's signature none	Date 	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code 	EIN 	Phone no. 	

**Copy B To Be Filed With Employee's
Federal Tax Return**

OMB No. 1545-0008

2003

a Control Number	1 Wages, tips, other comp. 883.93	2 Federal income tax withheld 21.08
b Employer ID number	3 Social security wages 668.93	4 Social security tax withheld 54.80
c Employer's name, address, and ZIP code	5 Medicare wages and tips 883.93	6 Medicare tax withheld 12.82
d Employee's social security number 165-54-6462		
e Employee's name, address, and ZIP code David A. D'Zmura		
7 Social security tips 215.00	8 Allocated tips 7.96	9 Advance EIC payment 0.00
10 Dependent care benefits	11 Nonqualified plans	12a Code
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
3rd party sick pay		12d Code
CA	883.93	
15 State: Empir.'s state I.D. #	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement
This information is being furnished to the Internal Revenue Service

Dept. of the Treasury - IRS

**Copy 2 To Be Filed With Employee's State,
City, or Local Income Tax Return**

OMB No. 1545-0008

2003

a Control Number	1 Wages, tips, other comp. 883.93	2 Federal income tax withheld 21.08
b Employer ID number	3 Social security wages 668.93	4 Social security tax withheld 54.80
c Employer's name, address, and ZIP code	5 Medicare wages and tips 883.93	6 Medicare tax withheld 12.82
d Employee's social security number 165-54-6462		
e Employee's name, address, and ZIP code David A. D'Zmura		
7 Social security tips 215.00	8 Allocated tips 7.96	9 Advance EIC payment 0.00
10 Dependent care benefits	11 Nonqualified plans	12a Code
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
3rd party sick pay		12d Code
CA	883.93	
15 State: Empir.'s state I.D. #	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

**Copy C For EMPLOYEE'S RECORDS
(See Notice to Employee on back of Copy B.)**

OMB No. 1545-0008

2003

a Control Number	1 Wages, tips, other comp. 883.93	2 Federal income tax withheld 21.08
b Employer ID number	3 Social security wages 668.93	4 Social security tax withheld 54.80
c Employer's name, address, and ZIP code David A. D'Zmura	5 Medicare wages and tips 883.93	6 Medicare tax withheld 12.82
d Employee's social security number 165-54-6462		
e Employee's name, address, and ZIP code David A. D'Zmura		
7 Social security tips 215.00	8 Allocated tips 7.96	9 Advance EIC payment 0.00
10 Dependent care benefits	11 Nonqualified plans	12a Code
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
3rd party sick pay		12d Code
CA	883.93	
15 State: Empir.'s state I.D. #	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement
This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

Extra Employee Copy

OMB No. 1545-0008

2003

a Control Number	1 Wages, tips, other comp. 883.93	2 Federal income tax withheld 21.08
b Employer ID number	3 Social security wages 668.93	4 Social security tax withheld 54.80
c Employer's name, address, and ZIP code	5 Medicare wages and tips 883.93	6 Medicare tax withheld 12.82

d Employee's social security number
165-54-6462

e Employee's name, address, and ZIP code

David A. D'Zmura

7 Social security tips 215.00	8 Allocated tips 7.96	9 Advance EIC payment 0.00
10 Dependent care benefits	11 Nonqualified plans	12a Code
13 Statutory employee	14 Other	12b Code
Retirement plan		12c Code
3rd party sick pay		12d Code
CA	883.93	
15 State: Empir.'s state I.D. #	16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

Copy B To Be Filed With Employee's
Federal Tax Return2003 OMB No.
1545-0008

a Control Number		1 Wages, tips, other comp. 143.91	2 Federal income tax withheld
b Employer ID number 3		3 Social security wages 143.91	4 Social security tax withheld 8.92
		5 Medicare wages and tips 143.91	6 Medicare tax withheld 2.09
c Employer's name, address, and ZIP code d Employee's social security number 165-54-6462			
e Employee's name, address, and ZIP code David A. D'Zmura			
7 Social security tips		8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits		11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee		14 Other SDI 1.30	12b Code 12c Code 12d Code
Retirement plan			
Third-party sick pay			
CA		143.91	
15 State Empl'r's state I.D. #		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

This information is being furnished to the Internal Revenue Service

3 days Automobile Salesperson Training : no sales or customer service

Copy 2 To Be Filed With Employee's State,
City, or Local Income Tax Return2003 OMB No.
1545-0008

a Control Number		1 Wages, tips, other comp. 143.91	2 Federal income tax withheld
b Employer ID number 3		3 Social security wages 143.91	4 Social security tax withheld 8.92
		5 Medicare wages and tips 143.91	6 Medicare tax withheld 2.09
c Employer's name, address, and ZIP code d Employee's social security number 165-54-6462			
e Employee's name, address, and ZIP code David A. D'Zmura			
7 Social security tips		8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits		11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee		14 Other SDI 1.30	12b Code 12c Code 12d Code
Retirement plan			
Third-party sick pay			
CA		143.91	
15 State Empl'r's state I.D. #		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

Copy C For EMPLOYEE'S RECORDS
(See Notice to Employee on back of Copy B.)

2003

OMB No.
1545-0008

a Control Number		1 Wages, tips, other comp. 143.91	2 Federal income tax withheld
b Employer ID number 3		3 Social security wages 143.91	4 Social security tax withheld 8.92
		5 Medicare wages and tips 143.91	6 Medicare tax withheld 2.09
c Employer's name, address, and ZIP code d Employee's social security number 165-54-6462			
e Employee's name, address, and ZIP code David A. D'Zmura			
7 Social security tips		8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits		11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee		14 Other SDI 1.30	12b Code 12c Code 12d Code
Retirement plan			
Third-party sick pay			
CA		143.91	
15 State Empl'r's state I.D. #		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

This information is being furnished to the IRS. If you are required to file a tax return, a negligence penalty/other sanction may be imposed on you if this income is taxable and you fail to report it.

Copy 2 To Be Filed With Employee's State,
City, or Local Income Tax Return2003 OMB No.
1545-0008

a Control Number		1 Wages, tips, other comp. 143.91	2 Federal income tax withheld
b Employer ID number 3		3 Social security wages 143.91	4 Social security tax withheld 8.92
		5 Medicare wages and tips 143.91	6 Medicare tax withheld 2.09
c Employer's name, address, and ZIP code d Employee's social security number 165-54-6462			
e Employee's name, address, and ZIP code David A. D'Zmura			
7 Social security tips		8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits		11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee		14 Other SDI 1.30	12b Code 12c Code 12d Code
Retirement plan			
Third-party sick pay			
CA		143.91	
15 State Empl'r's state I.D. #		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

a Control Number		1 Wages, tips, other comp. 143.91	2 Federal income tax withheld
b Employer ID number 3		3 Social security wages 143.91	4 Social security tax withheld 8.92
		5 Medicare wages and tips 143.91	6 Medicare tax withheld 2.09
c Employer's name, address, and ZIP code d Employee's social security number 165-54-6462			
e Employee's name, address, and ZIP code David A. D'Zmura			
7 Social security tips		8 Allocated tips	9 Advance EIC payment
10 Dependent care benefits		11 Nonqualified plans	12a Code See inst. for box 12
13 Statutory employee		14 Other SDI 1.30	12b Code 12c Code 12d Code
Retirement plan			
Third-party sick pay			
CA		143.91	
15 State Empl'r's state I.D. #		16 State wages, tips, etc.	17 State income tax
18 Local wages, tips, etc.		19 Local income tax	20 Locality name

Form W-2 Wage and Tax Statement

Dept. of the Treasury - IRS

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (10)

Profit or Loss From Business

(Sole Proprietorship)

OMB No. 1545-0074

2003

Attachment
Sequence No. 09

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

► Attach to Form 1040 or 1041. ► See Instructions for Schedule C (Form 1040).

Name of proprietor

David Andrew D'Zmura

Social security number (SSN)

165 54 6462

A Principal business or profession, including product or service (see page C-2 of the instructions)

Pro-se Independent Inventor and Author: intellectual and copyright properties

C Business name. If no separate business name, leave blank.

B Enter code from pages C-7, 8, & 9

► 9 9 9 9 9 9

D Employer ID number (EIN), if any

4 7 0 8 9 1 9 1 6

E Business address (including suite or room no.) ► David Andrew D'Zmura, P.O. Box 2541, Palm Desert, CA 92261-2541
City, town or post office, state, and ZIP code David Andrew D'Zmura, P.O. Box 2525, Palm Desert, CA 92261-2525

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) ► Depreciation based on FMV

G Did you "materially participate" in the operation of this business during 2003? If "No," see page C-3 for limit on losses Yes No

H If you started or acquired this business during 2003, check here

Part I Income

- 1 Gross receipts or sales. **Caution.** If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here ►
- 2 Returns and allowances
- 3 Subtract line 2 from line 1
- 4 Cost of goods sold (from line 42 on page 2)

- 5 **Gross profit.** Subtract line 4 from line 3
- 6 Other income, including Federal and state gasoline or fuel tax credit or refund (see page C-3)

- 7 **Gross income.** Add lines 5 and 6

1	-0-
2	-0-
3	-0-
4	-0-
5	-0-
6	-0-
7	-0-

Part II Expenses. Enter expenses for business use of your home only on line 30.

8	-0-		19	-0-
9	-0-		20	Rent or lease (see page C-5):
10	-0-		20a	a Vehicles, machinery, and equipment
11	-0-		20b	b Other business property
12	-0-		21	Repairs and maintenance
13	\$17,967,537	-	22	Supplies (not included in Part III)
14	-0-		23	Taxes and licenses
15	-0-		24	Travel, meals, and entertainment:
16a	-0-		24a	a Travel
16b	-0-		24b	b Meals and entertainment
17	-0-		24c	c Enter nondeductible amount included on line 24b (see page C-5)
18	-0-		24d	d Subtract line 24c from line 24b
28	Total expenses before expenses for business use of home. Add lines 8 through 27 in columns	►	25	-0-
29	Tentative profit (loss). Subtract line 28 from line 7		26	-0-
30	Expenses for business use of your home. Attach Form 8829	i have never had a business at home	27	1,476
31	Net profit or (loss). Subtract line 30 from line 29.	i have never had a home office	28	\$17,968,533

- If a profit, enter on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If a loss, you must go to line 32.
- 32 If you have a loss, check the box that describes your investment in this activity (see page C-6).
 - If you checked 32a, enter the loss on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
 - If you checked 32b, you must attach Form 6198.

19	-0-
20a	-0-
20b	-0-
21	-0-
22	-0-
23	-0-
24a	-0-
24b	-0-
24c	-0-
24d	-0-
25	-0-
26	-0-
27	1,476
28	\$17,968,533
29	(17,968,533)
30	-0-
31	(\$17,968,533)

32a All investment is at risk.
32b Some investment is not at risk.

Part III. Cost of Goods Sold (see page C-6)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation			<input type="checkbox"/> Yes <input type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation		35	
36	Purchases less cost of items withdrawn for personal use		36	
37	Cost of labor. Do not include any amounts paid to yourself		37	
38	Materials and supplies		38	
39	Other costs		39	
40	Add lines 35 through 39		40	
41	Inventory at end of year		41	
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4		42	

Part IV. Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file Form 4562.

<i>- I do not own a vehicle : never had a business purpose vehicle -</i>				
43 When did you place your vehicle in service for business purposes? (month, day, year) ►				
44 Of the total number of miles you drove your vehicle during 2003, enter the number of miles you used your vehicle for:				
a Business	b Commuting	c Other		
45 Do you (or your spouse) have another vehicle available for personal use?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
46 Was your vehicle available for personal use during off-duty hours?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
47a Do you have evidence to support your deduction?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
b If "Yes," is the evidence written?			<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part V. Other Expenses. List below business expenses not included on lines 8-26 or line 30.

2003: Patent Application Fees (Issuance, Filing, Petition, Exam Fees)	1,420	-
2003: Copyright Office Fees (Registration Fees)	30	-
2003: Copyright Office Refund (of 2002) Document Fee	(140	-)
2003: my ^{exclusive} use only U.S.P.S. Post Office Boxes Fees (2541 add 2525)	116	-
2003: my Personal Holding Company (PHC) Corp. 2002 Annual Franchise Tax	50	
48 Total other expenses. Enter here and on page 1, line 27	48	1,476 -

Schedule A—NOL. See page 5 of the instructions.

1	Adjusted gross income from your 2002 Form 1040, line 36: Estates and trusts, skip lines 1 and 2	1	(\$17,964,005)
2	Deductions:		
a	Enter the amount from your 2002 Form 1040, line 38	2a	4,750
b	Enter your deduction for exemptions from your 2002 Form 1040, line 40	2b	3,050
c	Add lines 2a and 2b	2c	7,800
3	Subtract line 2c from line 1. Estates and trusts, enter taxable income increased by the sum of the charitable deduction and income distribution deduction	3	(\$17,971,805)
Note: If line 3 is zero or more, do not complete the rest of the schedule. You do not have an NOL.			
4	Deduction for exemptions from line 2b above: estates and trusts, enter the exemption amount from tax return	4	3,050
5	Total nonbusiness capital losses before limitation. Enter as a positive number	5	-0-
6	Total nonbusiness capital gains (without regard to any section 1202 exclusion)	6	-0-
7	If line 5 is more than line 6, enter the difference; otherwise, enter -0-	7	-0-
8	If line 6 is more than line 5, enter the difference; otherwise, enter -0-	8	-0-
9	Nonbusiness deductions. See page 5 of the instructions	9	4,750
10	Nonbusiness income other than capital gains. See page 5 of the instructions	10	-0-
11	Add lines 8 and 10	11	-0-
12	If line 9 is more than line 11, enter the difference; otherwise, enter -0-	12	4,750
13	If line 11 is more than line 9, enter the difference; otherwise, enter -0-. But do not enter more than line 8	13	-0-
14	Total business capital losses before limitation. Enter as a positive number	14	-0-
15	Total business capital gains (without regard to any section 1202 exclusion)	15	-0-
16	Add lines 13 and 15	16	-0-
17	Subtract line 16 from line 14. If zero or less, enter -0-	17	-0-
18	Add lines 7 and 17	18	-0-
19	Enter the loss, if any, from line 17 of Schedule D (Form 1040). (Estates and trusts, enter the loss, if any, from line 16, column (3), of Schedule D (Form 1041).) Enter as a positive number. If you do not have a loss on that line (and do not have a section 1202 exclusion), skip lines 19 through 24 and enter on line 25 the amount from line 13	19	-0-
20	Section 1202 exclusion. Enter as a positive number	20	-0-
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	-0-
22	Enter the loss, if any, from line 18 of Schedule D (Form 1040). (Estates and trusts, enter the loss, if any, from line 17 of Schedule D (Form 1041).) Enter as a positive number	22	-0-
23	If line 21 is more than line 22, enter the difference; otherwise, enter -0-	23	-0-
24	If line 22 is more than line 21, enter the difference; otherwise, enter -0-	24	-0-
25	Subtract line 23 from line 18. If zero or less, enter -0-	25	-0-
26	NOL deduction for losses from other years. Enter as a positive number	26	-0-
27	NOL. Combine lines 3, 4, 12, 20, 24, 25, and 26. If the result is less than zero, enter it here and on page 1, line 1a. If the result is zero or more, you do not have an NOL	27	(\$17,964,005)

Statement Regarding 2003 NOL

I elect to carry forward my 2003 NOL, said 2003 NOL comprising 1) carryover of my 2002 NOL (after having first carried it back five years and filing 1040X's for 1997-2001) and, 2) carry forward of my 2003 NOL comprising 2003 amortization/depreciation of my intellectual and copyright properties (Section 197 depreciation of intangible assets).

David Andrew D'Zmura

David Andrew D'Zmura

April 8, 2004

My Patent Applications and Patent Works,
Inventions, Formulae and Algorithms
Intellectual Works and Properties:

Intangible Assets of
David Andrew D'Zmura
(sole owner/sole inventor/sole applicant)
SS# 165-54-6462

I have not transferred, assigned or sold, or licensed, granted, lent or put into storage or management, or hypothecated or secured, any interests, rights, permissions, benefits or entitlements in my patent applications and inventions, my intellectual works and properties, whether of Section 197 intangible assets, or of Section 179 tangible assets, to any outside or external party, person(s), entity, company, corporation, Sub. S, partnership, LLC, trust, foundation, estate or institution, outside myself, at any time. Further, I have not entered into any agreement at any time to do such, comprising a valid, written, original signature, contract, nor have I ever earned or received any income or compensation deriving from my activity and properties. I have never been employed, retained, hired or contracted by any outsider, comprising outside myself, for or respective my inventing, drawing, claim and specification preparation/drafting, applications filing and administration/prosecution. I have no payroll, no consultants, associates, employees or contractors, and I do not pay myself any salary or compensation for my efforts and expenses. I have never had an agent, executor, custodian, trustee or relative/guardian representing me, or in association with me, or with my intellectual works/properties, or my interests respective thereto, nor have I ever had a third-party designee administering my activity, works and properties, or authorized, designated or appointed by me respective my tax matters, tax preparations or tax filings. I have never granted any permissions to use my intangible assets, to file derivative patent applications or to publish, distribute or commercialize them.

Thank you.

David Andrew D'Zmura

David Andrew D'Zmura

P.O. Box 2541

Palm Desert, CA 92261-2541

April 8, 2004

My Copyrights, Registered and Unregistered,
Writings, Drawings / Illustrations, Musical and Visual, Aural
Works, Recordings, Performances and Properties:

Intangible Assets of (incl. my name, likeness and image)
David Andrew D'Zmura

(sole owner / sole author / sole registrant)

SS# 165-54-6462

I have not transferred, assigned or sold, or licensed, granted, lent or put into storage or management, or hypothecated or secured, any interests, rights, permissions, benefits or entitlements in my registered and unregistered copyrights, authored creative works and properties, and my name, likeness, personal biography, image, whether of Section 197 intangible assets, or of Section 179 tangible assets, to any outside or external party, person(s), entity, company, corporation, Sub. S, partnership, LLC, trust, foundation, estate or institution - outside myself - at any time. Further, I have not entered into any agreement at any time to do such, including or comprising a valid, written, original signature, contract, nor have I ever earned or received any income or compensation deriving from my activity and properties. I have never been employed, retained, hired or contracted by any outsider, comprising outside myself, for or respective my creations, my authorings (of text, music, words, sounds, photos, graphics, drawings and illustrations) and my being (of my name, image, likeness, gestures, expression). I have no payroll, no consultants, associates, employees or contractors, and I do not pay myself any salary or compensation for my efforts and expenses. I have never had an agent, executor, custodian, trustee or relative representing me, or in association with me, or with my ~~intellectual~~ copyright works/properties, or my interests respective thereto, nor have I ever had a third-party designee administering my activity, works and properties, or authorized, designated or appointed by me respective my tax matters, tax preparations or tax filings. I have never granted any permissions to use my intangible assets, including my name, likeness, image, expression and gestures, to register or to create derivative copyright works or registrations, or to publish, distribute or commercialize them in any manner.

Thank you.

David Andrew D'Zmura

David Andrew D'Zmura

P.O. Box 2525

Palm Desert, CA 92261-2525

April 8, 2004

2003

Section 179 Depreciation
of my Tangible Assets

personal property of David Andrew D'Zunno (sole owner)
: never hypothecated, sold, transferred, etc.

In my 2002 1040, I commenced a depreciation of my tangible assets, which I utilize in the creation, editing and mastering of my intellectual and copyright properties. These tangible assets include my electronic equipment, my musical and photographic equipment, etc.

In the Summer of 2003, and starting in April 2003, I decided to place my tangible assets back to my person, and obtained renter's insurance on my personal property (incl. the above items, and also my furniture, glass and dishware, silverware, etc.). Hence, I have reversed my 2002 decision to attribute my tangible assets to depreciation.

While it is true that I use my Sec. 179 tangible assets for my profession and enterprise as prose independent inventor and author more than 50%, it is not exclusive (100%) and thus, my decision to remove Section 179 Depreciation. I am, therefore, also reversing the Depreciation Deduction for 179 Tangible Assets which I claimed in 2002, of \$131.²⁵ Further, I am not deducting for any utilities/supplies. See Tangible Assets, Sec. 179, Depreciation Worksheets, 2002, TP-1 + TP-2, TC-1, TC-2, TC-3.

2003

Total Depreciation; (Line 13, Schedule C, EIN 47-0891916)
comprising) NOL Carryover,

2) 2003 Section 197 Intangible Assets,

3) reversal of 2002 Section 179 Tangible Assets :

1) NOL Carryover of \$7,360,522

2) 2003 Section 197 of \$10,606,666

3) reversal of 2002 Section 179 of \$131.

Total Depreciation for 2003 equals \$17,967,057.

$\$7,360,522 + \$10,606,666 - \$131 = \$17,967,057$

David John D'Zunno

April 8, 2004

2003

Section 197 Depreciation of my Intangible Assets

Intellectual Property of David Andrew D'Zmura

and Copyright Property of David Andrew D'Zmura

(sole owner)

: never hypothecated, sold, transferred, assigned, etc.

Fair Market Value (FMV) of my depreciating Section 197 Intangible Assets:

A) based on my depreciation calculation in my 2002 1040 Schedule C, of my Section 197 Depreciation attachment, the IRS accepted my calculation and entered my calculated NOL, applying straight line 15 year amortization/depreciation of \$7,400,000, which I carried back five years. I filed 1040X's for 1997-2001, which were accepted and entered by the IRS, with a change only from my filings for my 1999 1040X, wherein I calculated a refund due me of \$1,586, which the IRS re-calculated as \$1,591.99, and after adding interest, the IRS sent me a 1999 refund of \$1,644.!! Thank you!

1) Starting in 2002, and continuing for the 15-year amortization period of depreciation, each year, depreciation of \$7,400,000 accrues; : 2003 depreciation of \$7.4 million of 2002 197 Assets;

2) my Schedule B NOL carryover (per Form 1045) concluded in 2001 with an outstanding NOL (to be carried forward to 2003 (and beyond)) of \$7,360,528 - however, because the IRS recalculated my 1999 1040X as \$1,592 vs. \$1,586, I am necessarily subtracting the \$6 difference from my outstanding NOL carryover:

$$: \$7,360,528 - \$6 = \$7,360,522;$$

3) in 2003, I filed 13 new patent applications and one copyright registration: the ^{most} majority of my new patent applications contain my matter and claims which have already been approved by the U.S.P.T.O. via the International Preliminary Examination, hence, my 15-year straight line depreciation for 13 new applications (in 2002, I had 30 patent filings), hence, FMV increase 2003:

$$\frac{43}{30} \times \$7,400,000 = 2003 \text{ depreciation} = \$10,606,666$$

plus, NOL carryover of \$7,360,522 :

4) total 2003 NOL from Section 197 Depreciation (incl. carryover):
$$\$10,606,666 + \$7,360,522 = \$17,967,188.$$

David Andrew D'Zmura

April 8, 2004

Disclosure of Ownership (100%)

My Personal Holding Company (PHC) Corporation

Tetragrammaton, Inc. EIN 25-1904094

of which, I, David Andrew D'Zmura, am (SS#165-54-6462)

sole owner/sole shareholder, sole director, sole officer, sole executor

On November 8, 2002, I incorporated Tetragrammaton, Inc., as my personal holding company (PHC), bearing State of Delaware Corporate File #3589221, being my personal holding company (Form 1120 Corp., Schedule PH) for my creative and intellectual properties, copyrights and patent assets, of which I am the sole director, sole officer, sole shareholder and sole executor. Other than myself, this corporation has no employees, no officers, no directors, no executors, no trustees, no owners or shareholders. This company has no payroll and has not contracted or engaged any party. This company has never earned any income and has never executed any business or commerce with the public. This company has never offered or provided any service or product to the public, or to any person or entity outside myself. It has never offered, sold or transferred any shares to the public, or to any person or entity outside myself. This company has not issued, assigned, transferred, lent, hypothecated, sold or placed as security/collateral any shares to any outside or external party, person(s), entity, company, corporation, Sub. S, partnership, LLC, trust, foundation, estate or institution - outside myself. My PHC corporation has not earned any income or distributed any dividends; it has never entered, effected or contracted the assets of my personal holding to any outsider, outside myself. In 2003, and at present, my PHC corporation, Tetragrammaton, Inc., EIN 25-1904094, has no physical or business location or address, and it has, in 2003 and at present, no agent, executor, representative, related company or partner.

Attached, see IRS letter to me, of 12/12/03, LTR 147C, reference number 0533059199 confirming absence of a location address.

Thank you.

mailing address:

Tetragrammaton, Inc.

c/o David Andrew D'Zmura (sole owner/sole shareholder,
sole director, sole officer,
sole executor)

P.O. Box 2541

Palm Desert, CA 92261-2541

April 8, 2004

David Andrew D'Zmura

Tetragrammaton, Inc.

EIN 25-1904094

Disclosure of Information

My Sole Proprietorship, Professional Activity,

David Andrew D'Zmura EIN 47-0891916

of which, I, David Andrew D'Zmura, am (SS#165-54-6462)

sole owner, sole proprietor, sole representative, sole executor

My sole proprietorship, professional activity, David Andrew D'Zmura, EIN 47-0891916, relates solely to, and has ever only solely related to, my professional activity as pro-se independent inventor and author. It does not, and has never related to, relate to any other Schedule C self-employment activity I have done in the course of my life, or to any W-2 employment activity I have ever done, nor does it relate to any outside person, party, entity, company, corporation, Sub.S, partnership, LLC, trust, foundation, estate or institution - outside myself. My sole proprietorship has never been employed, retained, hired or contracted by any outsider, and I have never offered or enjoined my sole proprietorship, or the products of my activity - my intellectual and copyright properties and works - to any outside party or to the public. I have never earned any income, or been in contract, or worked for hire, from my professional activity. I have no payroll, no consultants or associates, employees, contractors, partners, investors, and I do not pay myself any salary or compensation for my efforts and expenses. I have never had an agent, executor, custodians, trustee or relative/guardian representing me, nor have I ever had a third-party designee administering my activity, works and properties, or authorized, designated or appointed by me respective my tax matters, tax preparations or tax filings. I have never granted any permissions to use my sole proprietorship, its name or its EIN, or its products and works and properties. At its inception in 2002 having an EIN assigned, my sole proprietorship, EIN 47-0891916, did not have a physical address or business location, and through 2003 and to the present, my sole proprietorship has never had a location or address, physical or business. Attached, see IRS letter to me, of 12/12/03, LTR 147C, reference number 0533059199 confirming absence of a location address. Further, I have never had a prior name, of any type or form, associated with my EIN 47-0891916 or with my professional activity as being a pro-se independent inventor and author.

Thank you.

David Andrew D'Zmura

April 28, 2004

mailing address: David Andrew D'Zmura

P.O. Box 2541
Palm Desert, CA 92261-2541

Request for Information and for Investigation
My Personal Income Tax Account
SS#165-54-6462

During the last year, in speaking with the IRS and the Social Security Administration, a number of unusual, suspicious and possibly criminal or fraudulent indications have been revealed to me in part, but without enough elaboration at your end.

- 1) the only parents I have ever known, Thomas and Justine D'Zmura, swear that I am their natural biological child, born November 21, 1960, yet an IRS agent indicated that is not true, that I am not their natural born child and that my birth date is actually in June (exact date/year not specified);
- 2) the SSA indicated that the Social Security Card my parents got me (1975) looks (given it is printed only with "DAVID A DZMURA"), given middle initial, like a tax entity, not an individual's card; and gives that there was no apparent, or stated, reason provided to me by my parents why they would do so, or why they would get me a SS card then (since I didn't get my first part time job until a couple years later), I am really at a loss to understand what the actual facts are regarding my birth and estate;
- 3) in the event there is a tax entity or estate to my benefit, be advised that I have never been informed of such, never been given any access to it, any specifics about it, and most importantly, never any benefit from it;
- 4) last Summer, in phoning to the IRS, I was told that someone (not me) had contacted the IRS to attach the phone numbers, (760) 345-5753 and (760) 340-0998, to my personal income tax account - that is tax fraud - as neither number is mine, and I have never authorized anyone to operate on my tax matters, and I have never appointed any executor, CPA, attorney or third-party designee with respect to my tax, financial, administrative or legal affairs;
- 5) early last Fall, in phoning to the IRS, I was told (by IRS business and specialty tax line) that there were four EIN's showing in the IRS database as attached to my SS#165-54-6462, or as attaching my SS# to the four EIN entities - yet I only have 2 (two) EIN entities (25-1904094 and 47-0891916) - your IRS agent did not state the other two to me, but instead instructed me to send/fax a letter to EIN IRS Phila, PA, which I did in early November 2003:

: what are the other two EIN entities and what are they about?

: in 1989-1993, I had a Delaware corp., Valcaven, Inc., of which I was an sole owner/sole officer/sole director/Thank you. - and an EIN for it : c/o Agents for Delaware : sole executor.
: a sub. S. corp. : State B. Brockerman Streets; Dover, DE

Dad John D'Zmura SS#165-54-6462

April 8, 2004

: I never sold my Valcaven, Inc., or anything in it, or had any employees or associates, or partners or investors, or other people as officers, directors or as shareholders.

David Andrew D'Zmura

Change of Residential Address

During the last year, I have been subjected to a continual battering of crimes against me, principally robberies of my home, mail theft, phone hijacking/sabotaging, credit fraud, identity theft and murder attempts - principally by poisons planted by trespassers. I was living at 78650 Avenue 42, Apt. 810, Bermuda Dunes, CA 92201, as sole resident, renting an apartment. I have moved out, 3/22/04. I currently reside, this is my only physical address anywhere, at present:

David A. D'Zunera

82-485 Miles Avenue
Indio, CA 92201
Tel: (760) 347-9022. & this is my sole contact phone #

I will update you with any new residential address, as and when I leave this interim residential location. Thank you.

Further Concluding Remark

Since 1978, and continuing, ardently in 1998 and recently, I have been subjected to murder attempts, but with no known reason I am aware of. Also, I am not married (or separated), and I do not have any children. I am not a Jr. or a Sr., II, III, etc. Also, I have contacted the police and the IRS Fraud Hotline. I hope and pray that the IRS will provide me some answers and will help address, arrest and punish the offenders. Thank you.

David A. D'Zunera

David A. D'Zunera
SS# 165-54-6462

April 8, 2004

Section 197 Intangible Assets (pro. se independent inventor)
 of David & Andrew D'Zunno (sole owner/sole app: cont/sole inventor)
(new Patent Applications in 2003): not made for hire

2003

Patent Applications
Intellectual Property of
David & Andrew D'Zunno
Description of Property
Patent Applications
(APP1. #)

<u>Patent Applications</u>	<u>Intellectual Property of</u>	<u>Date Placed in Service</u>	<u>Cost or Other Basis</u>	<u>Investment Use/ Business Use</u>	<u>FMV</u>	<u>100%</u>
10 671,415		9 25 03				
10 681,356		10 8 03				
10 681,357		10 8 03				
10 681,358		10 8 03				
10 681,359		10 8 03				
10 681,360		10 8 03				
10 681,361		10 8 03				
10 681,362		10 8 03				
10 681,363		10 8 03				
10 681,364		10 8 03				
10 681,365		10 8 03				
10 681,366			10 8 03			
10 681,367			10 8 03			

David & Andrew D'Zunno

April 7, 2004

Section 197 Tangible Assets (prior to independent inventor)
of David Andrew Zimmerman (sole owner) sole applicant (sole inventor)
(b6)(1)(2)(b)(6)(c) : thorough 2002 : not made for hire

2002

Depreciation Worksheet (keep for your records.)

Yod Beshorah April 27, 2004

Section 197 Intangible Assets (prise in independent author)
of David Andrew D'Zmura (sole owner/sole registrant/sole author)
new Copyright Registrations in 2003: not made for hire

2003

Copyright Registrations
Copyright Properties (registered)
of David Andrew D'Zmura
Description of Property:
Copyright Works Registered

TX 5-827-861

Copyright Registrations	Date Placed in Service	Cost or Other Basis	Investment Use / Business Use	100 %
10/10/03	FMV			

David Andrew D'Zmura

April 7, 2004

Section 197 Intangible Assets

of David Andrew D'Zunera (sole author/ sole owner) (sole registrant)
 (born 11/21/60, Cincinnati, Ohio) : through 2002: not made for hire

Depreciation Worksheet (keep for your records.)

2002

Copyright Registrations	Description of Property	Date Placed in Service	Registration Date on Poster or Other Basis	Business/ Investment Use %	Section 179 Deduction and Special Allowance	Depreciation Prior Years	Basis for Depreciation	Method/ Convention	Recovery Period	Rate or Table %	Depreciation Deduction
PAu-1-292-518	Copyright Properties (req'd)	Upon Creation	FMV	100 %							
SRu-378-578	of David Andrew D'Zunera		Oct 30 1989								
SRu-410-562			Jan 6 1998								
SRu-417-610			June 11 1999								
TX-4-262-500			Oct 25 1999								
TX-4-844-645			July 30 1999								
TX-5-421-398			Jan 26 1999								
TX-u-816-824			July 25 2001								
TX-u-818-802			Sept 9 1997								
TX-u-845-861			Dec 31 1997								
TX-u-870-661			Mar 25 1998								
TX-u-889-554			July 17 1993								
TX-u-898-496			June 26 1998								
TX-u-897-589			April 13 1999								
TX-u-925-806			Mar 24 1999								
TX-u-929-553			Nov 9 1991								
TX-u-932-070			Oct 6 1999								
TX-u-932-174			Dec 17 1999								
TX-u-951-378			Jan 10 2000								
			May 4 2000								
TX-u-960-295			June 23 2000								
TX-u-960-328			June 23 2000								
TX-u-961-905			June 16 2000								
TX-u-961-906			June 16 2000								
TX-u-961-907			June 16 2000								
TX-u-1-040-540			Jan 11 2001								
TX-u-1-040-541			Jan 11 2002								
VA-u-4350-881			Nov 3 1998								
Plus Unregistered Copyright Works upon Creation											
			FMV	100 %							

David Andrew D'Zunera April 7, 2004

Section 179 Tangible Assets
of David Andrew Zimmerman (sole owner)
(born 11/21/68) (canc. in est. 6/1/10)

2003
0.5-
ck

بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ (بَرَكَاتُهُ مُبَارَكَةٌ) ١٢١ | ٦٨ | ٥٤ : (بَرَكَاتُهُ مُبَارَكَةٌ) ١٢١ | ٦٨ | ٥٤ : (بَرَكَاتُهُ مُبَارَكَةٌ) ١٢١ | ٦٨ | ٥٤ :

2002

Revised & Extended by the Author

Depreciation Worksheet (keep for your records.)

Description of Property	Date Placed in Service	Cost or Other Basis	Business/ Investment Use %	Section 179 Deduction and Special Allowance	Depreciation Prior Years	Basis for Depreciation	Method/ Convention	Recovery Period	Rate or Table %	Depreciation Deduction
Tangible Assets, cont'd										
floating cabinets (3 units)	1996, 2001	9:ft (used)	750%							
antique desk (kitchen shaped)	1987	\$100	value > \$500							
many illustrations and drawings specifications and claims transparencies	1987	\$100	value > \$500							
computer files and folders floppy disks CD ROM disks	1987	\$100	value > \$500							
mailing / fax copying receipts patient application forms	1987	\$100	value > \$500							
patient application filing receipts patent office correspondence printed matter copies	1987	\$100	value > \$500							
folders, notes, sketches, press pads research items, slipping, photocopies mathematical derivations, calculations technical or functional specs + designs coded mathematical processing functions	1983 -	\$100	value > \$500							

-12-

Dad John (Dinner) April 7, 2004

Section 179 Tangible Assets
of David Andrew Dizmura (sole owner)
(born 11/21/60, Cincinnati, Ohio)

2002
Copyrights

2003

Placed back to my person

TC-1

Depreciation Worksheet (keep for your records.)

Description of Property	Date Placed in Service	Cost or Other Basis	Business/ Investment Use %	Section 179 Deduction and Special Allowance	Depreciation Prior Years	Basis for Depreciation	Method/ Convention	Recovery Period	Rate or Table %	Depreciation Deduction
Tangible Assets			> 50 %							
Texas Instruments Travel Mate 6030 Serial #41174602658	1996	\$3,346								
Canon BJ-C-620 printer/scanner Serial # BAH 97940	1997	\$603.12								
Canon StarWriter 60 (word Ser. # No. M1P2 047651 process))	1993	~\$300 (9.4%)								
Yamaha MTX 1/4-track cassette recorder Serial # MBS 5L125185	1986	\$605 (incl. AT 4500)								
Roland U-20 synthesizer Serial # A267049	1987	~\$1200 (9.4%)								
Audio-Technica 450D microphone Serial # FD 3F-3P	1986	incl. \$114 x								
Casio PT-20 pocket keyboard Serial # 3C112A	1984	~\$30								
early 1960's aqua/green Silvertone electric guitar	1987	found in dump (value: very rare)								
1940's Silvertone acoustic guitar	1986	9 ft								
English Dolcimer 00443	1986	~\$50 (\$50)								
Nakko NA-850 amplifier Serial # A5808	1979	~\$650 (insured loss)								
		incl. Dual 50W and EP1100	> 50 %							

David Andrew Dizmura April 7, 2004

Section 179 Tangible Assets
of David Andrew Dzivava (sole owner)
(born 11/21/60, Cincinnati, OH)

2002
Capital Assets

2003

placed back to my person

TC-2

Depreciation Worksheet (keep for your records.)

Description of Property	Date Placed in Service	Cost or Other Basis	Business/ Investment Use %	Section 179 Deduction and Special Allowance	Depreciation Prior Years	Basis for Depreciation	Method/ Convention	Recovery Period	Rate or Table %	Depreciation Deduction
Tangible Assets Cont'd				7500						
Sony TC-W2 cassette deck	1989	~\$120								
Serial # 810683		(9: ft)								
Dual 504 turntable	1979	~700								
Serial # 238010										
Brother PDC-100 disk sequencer	1990	~\$200								
Serial # 211286		(9: ft)								
Minolta X-500 camera	1983	~\$350 (DM 1200)								
Serial # 6002978		(9: ft)								
Exakta Telephoto lens	1983	- incl. x500								
Serial # 102940488										
Minolta 50 mm lens	1983	- incl. x500								
Serial # 1029310953										
camera bag (anti-theft doctor's bag)	1983	~\$10 (DM 30)								
camera tripod (Cullmann 2560)		~\$30 (DM 100)								
Lexmark Z43 printer	2002	\$116.52								
Serial # 22520586543										
HP fax 1020	2002	\$215.48								
Serial # CNE1CA0S8N										
Sony VHS PC6-FXA49	2002	\$169.29 (incl 2000)								
Serial # 283470303101916		on loan prior 3/17								
Battery & Power cord for TI 6030	2002	\$304.92								
		>50%								

David Andrew Dzivava April 7, 2004

Section 179 Tangible Assets
of David Andrew D'Zmura (sole owner)
(born 11/21/60, Cincinnati, Ohio)

2002
July 9, 2002

2003
red back

لہوڑا ॥ ۲۱ ॥ ۶۰، (عینہ، ۰۶۰)

Depreciation Worksheet (keep for your records.)

TC-3

121

D7e0d0 MIDI Translator and 1997 \$365 350%

Dale Oberholtzer Apr. 9, 2004

Label

(See instructions on page 21.)

Use the IRS label.
Otherwise, please print or type.Presidential
Election Campaign
(See page 21.)

For the year Jan. 1-Dec. 31, 2002, or other tax year beginning		2002, ending	20	OMB No. 1545-0074
Your first name and initial David Andrew		Last name D'Zmura		Your social security number 165 54 6462
If a joint return, spouse's first name and initial - no spouse -		Last name		Spouse's social security number
Home address (number and street). If you have a P.O. box, see page 21. 78650 Avenue 42			Apt. no. 810	
City, town or post office, state, and ZIP code. If you have a foreign address, see page 21. Bermuda Dunes, CA 92201				

Important!

You must enter your SSN(s) above.

You Yes No Yes

Filing Status

Check only one box.

Note. Checking "Yes" will not change your tax or reduce your refund.

Do you, or your spouse if filing a joint return, want \$3 to go to this fund? Yes No Yes

1 <input checked="" type="checkbox"/> Single	4 <input type="checkbox"/> Head of household (with qualifying person). (See page 2 the qualifying person is a child but not your dependent, enter this child's name here. ▶)
2 <input type="checkbox"/> Married filing jointly (even if only one had income)	5 <input type="checkbox"/> Qualifying widow(er) with dependent child (year spouse died ▶). (See page 21.)
3 <input type="checkbox"/> Married filing separately. Enter spouse's SSN above and full name here. ▶	

Exemptions

If more than five dependents, see page 22.

6a <input checked="" type="checkbox"/> Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a	No. of boxes checked on 6a and 6b		
b <input type="checkbox"/> Spouse	No. of children on 6c who:		
c Dependents:	• lived with you		
(1) First name None	(2) Dependent's social security number INTERNAL REVENUE SERVICE	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if qualifying child for child tax credit (see page 22) <input type="checkbox"/>
	RECEIVED		<input type="checkbox"/>
			<input type="checkbox"/>
	APR 15 2003	3:11 pm	<input type="checkbox"/>
			<input type="checkbox"/>
d Total number of exemptions claimed PALM SPRINGS, CA	Add numbers on lines above ▶		

Income

Attach Forms W-2 and W-2G here. Also attach Form(s) 1099-R if tax was withheld.

If you did not get a W-2, see page 23.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2	7 <input type="checkbox"/> -0-
8a Taxable interest. Attach Schedule B if required	8a <input type="checkbox"/> -0-
b Tax-exempt interest. Do not include on line 8a	8b <input type="checkbox"/> -0-
9 Ordinary dividends. Attach Schedule B if required	9 <input type="checkbox"/> -0-
10 Taxable refunds, credits, or offsets of state and local income taxes (see page 24)	10 <input type="checkbox"/> -0-
11 Alimony received	11 <input type="checkbox"/> -0-
12 Business income or (loss). Attach Schedule C or C-EZ	12 <input type="checkbox"/> (\$7,405,281 3)
13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶	13 <input type="checkbox"/> -0-
14 Other gains or (losses). Attach Form 4797	14 <input type="checkbox"/> -0-
15a IRA distributions 15a -0-	b Taxable amount (see page 25)
16a Pensions and annuities 16a -0-	b Taxable amount (see page 25)
17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17 <input type="checkbox"/> -0-
18 Farm income or (loss). Attach Schedule F	18 <input type="checkbox"/> -0-
19 Unemployment compensation	19 <input type="checkbox"/> -0-
20a Social security benefits 20a -0-	b Taxable amount (see page 27)
21 Other income. List type and amount (see page 29)	21 <input type="checkbox"/> -0-
22 Add the amounts in the far right column for lines 7 through 21. This is your total income ▶	22 <input type="checkbox"/> (\$7,405,281 3)

Adjusted Gross Income

23 Educator expenses (see page 29)	23 <input type="checkbox"/> -0-
24 IRA deduction (see page 29)	24 <input type="checkbox"/> -0-
25 Student loan interest deduction (see page 31)	25 <input type="checkbox"/> -0-
26 Tuition and fees deduction (see page 32)	26 <input type="checkbox"/> -0-
27 Archer MSA deduction. Attach Form 8853	27 <input type="checkbox"/> -0-
28 Moving expenses. Attach Form 3903	28 <input type="checkbox"/> -0-
29 One-half of self-employment tax. Attach Schedule SE	29 <input type="checkbox"/> -0-
30 Self-employed health insurance deduction (see page 33)	30 <input type="checkbox"/> -0-
31 Self-employed SEP, SIMPLE, and qualified plans	31 <input type="checkbox"/> -0-
32 Penalty on early withdrawal of savings	32 <input type="checkbox"/> -0-
33a Alimony paid b Recipient's SSN ▶	33a <input type="checkbox"/> -0-
34 Add lines 23 through 33a	34 <input type="checkbox"/> -0-
35 Subtract line 34 from line 22. This is your adjusted gross income	35 <input type="checkbox"/> (\$7,405,281 3)

Tax and Credits**Standard Deduction for—**

- People who checked any box on line 37a or 37b or who can be claimed as a dependent, see page 34.

- All others: Single, \$4,700

- Head of household, \$6,900

- Married filing jointly or Qualifying widow(er), \$7,850

- Married filing separately, \$3,925

36	Amount from line 35 (adjusted gross income)	36	(\$7,405,281 32)
37a	Check if: <input type="checkbox"/> You were 65 or older, <input type="checkbox"/> Blind; <input type="checkbox"/> Spouse was 65 or older, <input type="checkbox"/> Blind. Add the number of boxes checked above and enter the total here ► 37a <input type="checkbox"/>	38	4,700 -
b	If you are married filing separately and your spouse itemizes deductions, or you were a dual-status alien, see page 34 and check here ► 37b <input type="checkbox"/>	39	(\$7,409,981 32)
38	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	3,000
39	Subtract line 38 from line 36	41	-0-
40	If line 36 is \$103,000 or less, multiply \$3,000 by the total number of exemptions claimed on line 6d. If line 36 is over \$103,000, see the worksheet on page 35	42	-0-
41	Taxable income. Subtract line 40 from line 39. If line 40 is more than line 39, enter -0-	43	-0-
42	Tax (see page 36). Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	-0-
43	Alternative minimum tax (see page 37). Attach Form 6251		
44	Add lines 42 and 43		
45	Foreign tax credit. Attach Form 1116 if required	45	-0-
46	Credit for child and dependent care expenses. Attach Form 2441	46	-0-
47	Credit for the elderly or the disabled. Attach Schedule R	47	-0-
48	Education credits. Attach Form 8863	48	-0-
49	Retirement savings contributions credit. Attach Form 8880	49	-0-
50	Child tax credit (see page 39)	50	-0-
51	Adoption credit. Attach Form 8839	51	-0-
52	Credits from: a <input type="checkbox"/> Form 8396 b <input type="checkbox"/> Form 8859	52	-0-
53	Other credits. Check applicable box(es): a <input type="checkbox"/> Form 3800 b <input type="checkbox"/> Form 8801 c <input type="checkbox"/> Specify	53	-0-
54	Add lines 45 through 53. These are your total credits	54	-0-
55	Subtract line 54 from line 44. If line 54 is more than line 44, enter -0-	55	-0-

Other Taxes

56	Self-employment tax. Attach Schedule SE	56	-0-
57	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	57	-0-
58	Tax on qualified plans, including IRAs, and other tax-favored accounts. Attach Form 5329 if required	58	-0-
59	Advance earned income credit payments from Form(s) W-2	59	-0-
60	Household employment taxes. Attach Schedule H	60	-0-
61	Add lines 55 through 60. This is your total tax	61	-0-

Payments

If you have a qualifying child, attach Schedule EIC.

62	Federal income tax withheld from Forms W-2 and 1099	62	-0-
63	2002 estimated tax payments and amount applied from 2001 return	63	-0-
64	Earned income credit (EIC)	64	-0-
65	Excess social security and tier 1 RRTA tax withheld (see page 56)	65	-0-
66	Additional child tax credit. Attach Form 8812	66	-0-
67	Amount paid with request for extension to file (see page 56)	67	-0-
68	Other payments from: a <input type="checkbox"/> Form 2439 b <input type="checkbox"/> Form 4136 c <input type="checkbox"/> Form 8885	68	-0-
69	Add lines 62 through 68. These are your total payments	69	-0-

Refund

Direct deposit?

See page 56 and fill in 71b, 71c, and 71d.

70	If line 69 is more than line 61, subtract line 61 from line 69. This is the amount you overpaid	70	-0-
71a	Amount of line 70 you want refunded to you	71a	-0-
b	Routing number	c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
d	Account number		
72	Amount of line 70 you want applied to your 2003 estimated tax	72	-0-
73		73	-0-

Amount You OweDo you want to allow another person to discuss this return with the IRS (see page 58)? Yes. Complete the following. No

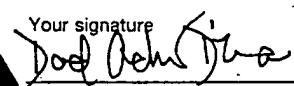
Designee's name ► Phone no. ► () — Personal identification number (PIN) ►

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

Joint return? See page 21.

Keep a copy for your records.

Your signature  Date 4/15/03 Your occupation Self employed inventor and author Daytime phone number (760) 345-6597

Spouse's signature. If a joint return, both must sign. Date Spouse's occupation

Paid Preparer's Use OnlyPreparer's signature ► Date Check if self-employed Preparer's SSN or PTIN
Firm's name (or yours if self-employed), address, and ZIP code ► EIN Phone no. ()

SCHEDULE C
(Form 1040)

Profit or Loss From Business

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service (99)

(Sole Proprietorship)

2002

Attachment
Sequence No. 09

► Partnerships, joint ventures, etc., must file Form 1065 or 1065-B.

► Attach to Form 1040 or 1041. ► See Instructions for Schedule C (Form 1040).

Name of proprietor

David Andrew D'Zinura

Social security number (SSN)

165 54 6462

A Principal business or profession, including product or service (see page C-1 of the instructions)

Prose Independent Inventor: Inventions and Patent Applications

Author, Illustrator, Musician/Composer, Photographer: Copyright Properties

B Enter code from pages C-7, 8, & 9

► 9 9 9 9 9 9

C Business name. If no separate business name, leave blank.

D Employer ID number (EIN), if any

4 7 0 8 9 1 9 1 6

E Business address (including suite or room no.) ► P.O. Box 2541, Palm Desert, CA 92261 and

City, town or post office, state, and ZIP code P.O. Box 2525, Palm Desert, CA 92261

F Accounting method: (1) Cash (2) Accrual (3) Other (specify) ► Depreciation based on FMVG Did you "materially participate" in the operation of this business during 2002? If "No," see page C-3 for limit on losses Yes NoH If you started or acquired this business during 2002, check here ►

Part I Income

1 Gross receipts or sales. Caution. If this income was reported to you on Form W-2 and the "Statutory employee" box on that form was checked, see page C-3 and check here ►

2 Returns and allowances

3 Subtract line 2 from line 1

4 Cost of goods sold (from line 42 on page 2)

5 Gross profit. Subtract line 4 from line 3

6 Other income, including Federal and state gasoline or fuel tax credit or refund (see page C-3)

7 Gross income. Add lines 5 and 6 ► 7 -0-

1	-0-
2	-0-
3	-0-
4	-0-
5	-0-
6	-0-
7	-0-

Part II Expenses. Enter expenses for business use of your home only on line 30.

8 Advertising	8	-0-	19 Pension and profit-sharing plans	19	-0-
9 Bad debts from sales or services (see page C-3)	9	-0-	20 Rent or lease (see page C-5): a Vehicle, machinery, and equipment	20a	-0-
10 Car and truck expenses (see page C-3)	10	-0-	b Other business property	20b	-0-
11 Commissions and fees	11	-0-	21 Repairs and maintenance	21	-0-
12 Depletion	12	-0-	22 Supplies (not included in Part III)	22	\$1,272 17
13 Depreciation and section 179 expense deduction (not included in Part III) (see page C-4)	13	\$7,400,131	23 Taxes and licenses	23	-0-
14 Employee benefit programs (other than on line 19)	14	-0-	24 Travel, meals, and entertainment: a Travel	24a	-0-
15 Insurance (other than health)	15	-0-	b Meals and entertainment		-0-
16 Interest: a Mortgage (paid to banks etc.)	16a	-0-	c Enter nondeductible amount included on line 24b (see page C-5)		-0-
b Other	16b	-0-	d Subtract line 24c from line 24b	24d	-0-
17 Legal and professional services	17	-0-	25 Utilities	25	\$293 60
18 Office expense	18	-0-	26 Wages (less employment credits)	26	-0-
28 Total expenses before expenses for business use of home. Add lines 8 through 27 in columns ►	28	\$7,407,231	27 Other expenses (from line 48 on page 2)	27	\$5,827 90

29 Tentative profit (loss). Subtract line 28 from line 7

30 Expenses for business use of your home. Attach Form 8829

31 Net profit or (loss). Subtract line 30 from line 29.

- If a profit, enter on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If a loss, you must go to line 32.

32 If you have a loss, check the box that describes your investment in this activity (see page C-6).

- If you checked 32a, enter the loss on Form 1040, line 12, and also on Schedule SE, line 2 (statutory employees, see page C-6). Estates and trusts, enter on Form 1041, line 3.
- If you checked 32b, you must attach Form 6198.

32a All investment is at risk.
32b Some investment is not at risk.

Part III Cost of Goods Sold (see page C-6)

33	Method(s) used to value closing inventory:	a <input type="checkbox"/> Cost	b <input type="checkbox"/> Lower of cost or market	c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation			<input type="checkbox"/> Yes <input type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation	35	N/A	
36	Purchases less cost of items withdrawn for personal use	36		
37	Cost of labor. Do not include any amounts paid to yourself	37		
38	Materials and supplies	38		
39	Other costs	39		
40	Add lines 35 through 39	40		
41	Inventory at end of year	41		
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on page 1, line 4	42	N/A	

Part IV Information on Your Vehicle. Complete this part only if you are claiming car or truck expenses on line 10 and are not required to file Form 4562 for this business. See the instructions for line 13 on page C-4 to find out if you must file.

<i>- I do not own a vehicle -</i>				
43 When did you place your vehicle in service for business purposes? (month, day, year) ►				! ! !
44 Of the total number of miles you drove your vehicle during 2002, enter the number of miles you used your vehicle for:				
a Business	b Commuting	c Other		
45 Do you (or your spouse) have another vehicle available for personal use?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
46 Was your vehicle available for personal use during off-duty hours?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
47a Do you have evidence to support your deduction?			<input type="checkbox"/> Yes	<input type="checkbox"/> No
b If "Yes," is the evidence written?			<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8-26 or line 30.

2002: Patent Application Fees	\$ 4,501	97
2002: European Representation Fees for my European Patent Application	\$ 643	58
2002: Copyright Office Fees (Registration and Document Fees)	\$ 219	85
2002: U.S.P.S. Post Office Box Fees	\$ 116	-
2002: my Personal Holding Company (PHC) incorporation fees	\$ 346	50
.....		
.....		
.....		
.....		
48 Total other expenses. Enter here and on page 1, line 27	48	\$ 5,827 90

- Attachment ^(): Do Not Enter Process -*

Copyright Registered and Unregistered
Creative and Authored Works and Properties
of David Andrew D'Zunera
(Sole owner: born 11/21/60, Cincinnati, Ohio)

I have not transferred, assigned or sold, or licensed, granted or lent, or put into storage or maintenance, any interests, rights, permissions, benefits or entitlements in my registered and unregistered copyrights and authored creative works and properties, whether of Section 1179 or 197 assets, to any outside or external party, person(s), entity, company, corporation, Sub. S, partnership, LLC, trust, foundation, estate or institution, outside myself, at any time. Further, I have not entered into any agreement at any time to do such, comprising a valid, written, original signature, contract, nor have I ever earned or received any income or compensation deriving from my activity/properties. I have never been employed, retained or hired by any outsider, comprising outside myself, for or respective my creation and authoring. I have never had an agent, executor, custodian, trustee or relative representing me, my works/properties, or my interests respective thereto; nor have I ever had a third-party designee administering my activity, works and properties or authorized, designated or appointed by me respective my tax matters, tax preparations or tax filings. Thank you.

David Andrew D'Zunera

David Andrew D'Zunera
P.O. Box 2525
Palm Desert, CA 92261

April 15, 2003

- Attachment : Do Not Further Process -

Copyright Registered and Unregistered
Creative and Authored Works and Properties
of David Andrew D'Zunna
(Sole owner: born 11/21/60, Cincinnati, Ohio)

I have not transferred, assigned or sold, or licensed, granted or lent, or put into storage or maintenance, any interests, rights, permissions, benefits or entitlements in my registered and unregistered copyrights and authored creative works and properties, whether of Section 1179 or 197 assets, to any outside or external party, person(s), entity, company, corporation, Sub. S, partnership, LLC, trust, foundation, estate or institution, outside myself, at any time. Further, I have not entered into any agreement at any time to do such, comprising a valid, written, original signature, contract, nor have I ever earned or received any income or compensation deriving from my activity / properties.
I have never been employed, retained or hired by any outsider, comprising outside myself, for or respective my creation and authoring.
I have never had an agent, executor, custodian, trustee or relative representing me, my works/properties, or my interests respective thereto, nor have I ever had a third-party designee administering my activity, works and properties or authorized, designated or appointed by me respective my tax matters, tax preparations or tax filings. Thank you.

David Andrew D'Zunna

P.O. Box 2525
Palm Desert, CA 92261

April 15, 2003

- Attachment : Do Not Further Process -

Patent Applications and Inventions
Intellectual Works and Properties
of David Andrew D'Zunera
(sole owner: born 11/21/60, Cincinnati, Ohio)

I have not transferred, assigned or sold, or licensed, granted, lent or put into storage or management, any interests, rights, permissions, benefits or entitlements in my patent applications and inventions, intellectual works and properties, whether of Section 179 or 197 assets, to any outside or external party, person(s), entity, company, corporation, Sub. S, partnership, LLC, trust, foundation, estate or institution, outside myself, at any time. Further, I have not entered into any agreement at any time to do such, comprising a valid, written, original signature, contract, nor have I ever earned or received any income or compensation deriving from my activity / properties. I have never been employed, retained or hired by any outsider, comprising outside myself, for or respective my inventing, drawing, claim and specification preparation / drafting, application filing and administration. I have never had an agent, executor, custodian, trustee or relative representing me, my works / properties, or my interests respective thereto, nor have I ever had a third-party designee administering my activity, works and properties or authorized, designated or appointed by me respective my tax matters, tax preparations or tax filings. Thank you.

David Andrew D'Zunera

David Andrew D'Zunera
P.O. Box 2541
Palm Desert, CA 92261

April 15, 2003

- Attachment: Do Not Further Process -

2002

Section 197 Depreciation

Intellectual Property of David Andrew D'Zunna and
Copyright Property of David Andrew D'Zunna
(sole owner: born 11/21/60, Cincinnati, Ohio)

Fair Market Value (FMV) of my depreciating Section 197 Intangible Assets:

whereas the life of a patent is 20 years from the date of its earliest priority,
and whereas my ^{filed} intellectual properties comprise my inventions filed in
two areas, the first with priority to 1997, the second with priority to 1996;
and whereas the estimable revenue generated by my first invention group
exceeds \$1 billion over the life of the 20-year terms, and whereas the
estimable revenue generated by my second invention group exceeds \$100 million;
and whereas my copyright properties have estimable FMV over \$10 million;
rendering a total FMV revenue estimation of \$1,110,000,000 (lifetime);
scaling this total lifetime FMV revenue estimation by
a FMV licensing/royalty rate of 10%, yields

FMV of my inventing/authoring activity

FMV of my production of my intellectual and copyright properties

lifetime of \$111,000,000

applying straight line 15-year amortization/depreciation

renders depreciation 2002 of \$7,400,000.

Section 179 Depreciation

2002 purchased/put in use Assets

see Attached Depreciation Worksheet

\$131.²⁵

Summing these two figures, and entering sum on applicable
Schedule C, Part II, 13:

\$7,400,131.²⁵

David Andrew D'Zunna

April 15, 2003

- Attachment: Do Not Further Process -

Schedule A—NOL. See page 5 of the instructions.

1	Adjusted gross income from your 2002 Form 1040, line 36. Estates and trusts, skip lines 1 and 2	1	<u>(\$7,405,281.32)</u>	
2	Deductions:			
a	Enter the amount from your 2002 Form 1040, line 38	2a	<u>4,700</u>	
b	Enter your deduction for exemptions from your 2002 Form 1040, line 40	2b	<u>3,000</u>	
c	Add lines 2a and 2b	2c	<u>7,700 -</u>	
3	Subtract line 2c from line 1. Estates and trusts, enter taxable income increased by the sum of the charitable deduction and income distribution deduction	3	<u>(7,412,981.32)</u>	
Note: If line 3 is zero or more, do not complete the rest of the schedule. You do not have an NOL.				
4	Deduction for exemptions from line 2b above. Estates and trusts, enter the exemption amount from tax return	4	<u>3,000 -</u>	
5	Total nonbusiness capital losses before limitation. Enter as a positive number	5	<u>-0-</u>	
6	Total nonbusiness capital gains (without regard to any section 1202 exclusion)	6	<u>-0-</u>	
7	If line 5 is more than line 6, enter the difference; otherwise, enter -0-	7	<u>-0-</u>	
8	If line 6 is more than line 5, enter the difference; otherwise, enter -0-	8	<u>-0-</u>	
9	Nonbusiness deductions. See page 5 of the instructions	9	<u>4,700</u>	
10	Nonbusiness income other than capital gains. See page 5 of the instructions	10	<u>-0-</u>	
11	Add lines 8 and 10	11	<u>-0-</u>	
12	If line 9 is more than line 11, enter the difference; otherwise, enter -0-	12	<u>4,700 -</u>	
13	If line 11 is more than line 9, enter the difference; otherwise, enter -0-. But do not enter more than line 8	13	<u>-0-</u>	
14	Total business capital losses before limitation. Enter as a positive number	14	<u>-0-</u>	
15	Total business capital gains (without regard to any section 1202 exclusion)	15	<u>-0-</u>	
16	Add lines 13 and 15	16	<u>-0-</u>	
17	Subtract line 16 from line 14. If zero or less, enter -0-	17	<u>-0-</u>	
18	Add lines 7 and 17	18	<u>-0-</u>	
19	Enter the loss, if any, from line 17 of Schedule D (Form 1040). (Estates and trusts, enter the loss, if any, from line 16, column (3), of Schedule D (Form 1041).) Enter as a positive number. If you do not have a loss on that line (and do not have a section 1202 exclusion), skip lines 19 through 24 and enter on line 25 the amount from line 18	19	<u>-0-</u>	
20	Section 1202 exclusion. Enter as a positive number	20	<u>-0-</u>	
21	Subtract line 20 from line 19. If zero or less, enter -0-	21	<u>-0-</u>	
22	Enter the loss, if any, from line 18 of Schedule D (Form 1040). (Estates and trusts, enter the loss, if any, from line 17 of Schedule D (Form 1041).) Enter as a positive number	22	<u>-0-</u>	
23	If line 21 is more than line 22, enter the difference; otherwise, enter -0-	23	<u>-0-</u>	
24	If line 22 is more than line 21, enter the difference; otherwise, enter -0-	24	<u>-0-</u>	
25	Subtract line 23 from line 18. If zero or less, enter -0-	25	<u>-0-</u>	
26	NOL deduction for losses from other years. Enter as a positive number	26	<u>-0-</u>	
27	NOL. Combine lines 3, 4, 12, 20, 24, 25, and 26. If the result is less than zero, enter it here and on page 1, line 1a. If the result is zero or more, you do not have an NOL	27	<u>(7,405,281.32)</u>	

- Attachment - Do Not Further Process

2002 Schedule A NOL
of (\$7,405,281) carried back 5 years

Schedule B - NOL Carryover (per Form 1045)

	4th Proceeding Tax Year ended 12-31-97	3rd Proceeding Tax Year ended 12-31-98	2nd Proceeding Tax Year ended 12-31-99	1st Proceeding Tax Year ended 12-31-01
1. NOL Deductions	7,405,281.	7,403,631.	7,402,515.	7,384,458.
2. Taxable Income before NOL	2,387	17,608.	(368)	(23,468)
3. Net Capital Loss Deduction	-0-	-0-	-0-	-0-
4. Section 1202 Exclusion	-0-	-0-	-0-	-0-
5. Adjustments to ALTI (pre-NOL carryover/carryover)	(1,000.00)	(3,970.68)	(2,301.7)	8,066
6. Adjustment to Itemized Deductions	N/A -0-	N/A -0-	N/A -0-	N/A -0-
7. Deductions for exemptions	2,650.	2,750	2,800	2,900
8. Modified taxable income	1,650.	1,116.	18,057	10,498
9. NOL Carryover	7,403,631.	7,402,515.	7,384,458.	7,373,960.
10-17.	Note: I did not itemize deductions on my original tax return for 1995: Adjustment to Itemized Deductions	Note: I took the standard deduction for my status: Single (unmarried), no dependents I am not modifying or entering any itemized deductions on my 1040X's.		

-Attachment D: Net Future Proceeds -

PHILADELPHIA PA 19255-0038

In reply refer to: 0533059199
Dec. 12, 2003 LTR 147C
47-0891916 000000 00 000
01190
BODC: SB

DAVID ANDREW DZMURA
PO BOX 2541
PALM DESERT CA 92261-2541413

Employer Identification Number: 47-0891916

Dear Taxpayer:

Thank you for the inquiry dated Nov. 04, 2003.

Per your request, we have removed the location address from your account. Should you have any other questions, please contact our Customer Service.

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,
William Mesure

William Mesure
Operations Mgr., Accounts Mgt. I

Enclosure(s):
Copy of this letter

- Attachment : D. Not further Process -

PHILADELPHIA, PA 19255-0038

In reply refer to: 0533059199
Dec. 12, 2003 LTR 147C
25-1904094 000000 00 000
01189
BODC: SB

TETRAGRAMMATON INC
% DAVID ANDREW DZMURA
PO BOX 2541
PALM DESERT CA 92261-2541413

Employer Identification Number: 25-1904094

Dear Taxpayer:

Thank you for the inquiry dated Nov. 04, 2003.

Per your request, we have removed the location address on your account. Should you have any additional questions, please contact our Customer Service.

If you have any questions, please call us toll free at 1-800-829-0115.

If you prefer, you may write to us at the address shown at the top of the first page of this letter.

Whenever you write, please include this letter and, in the spaces below, give us your telephone number with the hours we can reach you. Also, you may want to keep a copy of this letter for your records.

Telephone Number () _____ Hours _____

We apologize for any inconvenience we may have caused you, and thank you for your cooperation.

Sincerely yours,
William Mesure

William Mesure
Operations Mgr., Accounts Mgt. I

Enclosure(s):

Copy of this letter

- Attachment: Do Not Further Process

For assistance, call:

1-800-829-8374

Your Caller ID: 042645

Notice Number: CP21B

Date: February 9, 2004



Department of the Treasury
Internal Revenue Service
Philadelphia, PA 19255-0010

149806.124065.0500.012 1 AB 0.301 692

DAVID A DZMURA
78650 AVE 42 APT 810
BERMUDA DUNES CA 92201-1356100

Taxpayer Identification Number:

165-54-6462

Tax Form: 1040

Tax Year: December 31, 1999

Amount of Refund

\$1,591.99

149806

This is not a bill

We Changed Your Account

We will explain why you received this notice, how we changed your account, how this change affects you, and actions you may wish to take.

Why You Received This Notice

We changed your tax account for 1999 because you requested a tentative carryback or a restricted interest claim.

Our action is the result of your inquiry of September 24, 2003.

How We Changed Your Account

We changed your account as follows:

Account balance before this change	None
Decrease in tax because of this change	\$1,586.00 CR
Decrease in interest previously charged*	\$5.99 CR
Amount to be refunded to you (if you owe no other taxes or other debts we are required to collect)	\$1,591.99

*If you claimed a tax deduction for this interest, remember to report it as income on your next tax return.

How This Affects You

You may have already received your refund by direct deposit or mail. If not, you can expect it in approximately 2 weeks. Your refund will include interest if applicable. We will notify you if any pending matters postpone your refund.

- Attachment: Do not further Process -

Other Actions You May Wish To Take

If you do not agree with the changes to your account or if you have questions about this notice, you may call 1-800-829-8374.

Helpful Hint: For faster service, try calling us any day except Monday when our call volumes are highest.

For tax forms, instructions and information visit www.irs.gov. (Access to this site will not provide you with any taxpayer account information.)

United States Treasury ¹⁵⁻⁵¹ ₀₀₀ P 821,292,423



Check No. [REDACTED]

2306 01847984

Pay to [REDACTED] PHILA TAX REFUND

the order of DAVID A DZMURA
78650 AVE 42 APT 810
BERMUDA DUNES CA 92201-1356

12/99
84 \$***1644*11

VOID AFTER ONE YEAR

Michael Chander
[REDACTED] FEDERAL BUREAU OF INVESTIGATION

52.12 INTEREST

- Attachment: Do Not Further Process -

INDIO MAIN PO
INDIO, California
922019998
0567760201-0096
04/12/2004 (800)275-8777 01:09:59 PM

Sales Receipt			
Product Description	Qty	Sale Price	Unit Price
FRESNO CA 93888		\$1.98	
First-Class Certified		\$2.30	
Label Serial #: 70032260000108978041			
Issue PVI:		\$4.28	
Total:		\$4.28	
Paid by:			
Cash		\$5.05	
Change Due:		-\$0.77	
Bill#:	1000401049340		
Clerk:	27		

— All sales final on stamps and postage. —
Refunds for guaranteed services only.
Thank you for your business.
Customer Copy

7003 2260 0001 0897-0041

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

FRESNO CA 93888

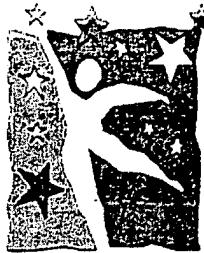
Postage	\$ 1.98
Certified Fee	\$ 2.30
Return Receipt Fee (Endorsement Required)	\$ 0.00
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 4.28

04/12/2004 271 Postmark Here

Sent To: Internal Revenue Service Center
Street, Apt. No.: _____
or PO Box No. _____

City, State, ZIP+4: Fresno, CA 93888-0082

PS Form 3800, June 2002. See Reverse for Instructions.



Oasis Rehabilitation Center, Inc.

Indio, CA 92201
Telephone: 760-863-8600
FAX: 760-863-8603

April 5, 2004

RE: DAVID D'ZMURA
DOB: 11/12/1960

To Whom It May Concern:

Mr. D'Zmura has been under my medical care continuously since March 23, 2004. Due to medical illness, he is not able to complete his requirements for his patent work by the required deadline. Your kind understanding in allowing him to have an appropriate deadline extension is greatly appreciated.

Very truly yours,

Anthony G. Bassanelli, MD

DOWNEY SAVINGS AND LOAN ASSOCIATION, F.A.

Passbook Account Summary
Account holder:

Account No.:

85

* DAVID ANDREW D'ZMURA AS AN INDIVIDUAL *

Opening Balance: \$ 1,644.11

Date of Issuance: 02/12/04

Initial Interest Rate: 00.41%

This account has no stated maturity.

Annual Percentage Yield: 00.41%

Frequency of Compounding: DAILY

This interest rate may be adjusted: DAILY

Minimum Addition: \$ NO MINIMUM

Interest is credited to the account: MONTHLY

Minimum Balance Requirement: \$ 5.00

General: This certifies that the account holder holds a savings account with the Opening Balance shown above at Downey Savings and Loan Association, F.A. (Downey), **BERMUDA DUNES** Branch. The account holder may from time to time, with the consent of Downey, make additions in any amount to this account. No assignment of this account in excess of \$25,000 shall be accepted nor shall any verification of information with respect thereto be valid or binding unless signed by the President or a Vice President of Downey. This account is not transferable except on the books of Downey.

Interest: This account shall receive interest at the initial interest rate set forth above. Interest shall be computed with the frequency of compounding above and shall be distributed after crediting to the account. After the Date of Issuance, advance written notice to the account holder of such change, as required.

Other Terms and Conditions: Other terms and conditions pertaining to this account are contained in Downey's deposit account rules and regulations and current schedule of fees and charges.

Check Cashing and Clearing: When a check is accepted, Downey may place a hold for that amount on the account until the check clears.

DOWNEY SAVINGS AND LOAN ASSOCIATION, F.A.

By: *[Signature]*

Authorized Signature

S-32-30 (6/95)



DOWNNEY SAVINGS
downneysavings.com

N, FA

DATE	WITHDRAWALS	INTEREST	DEPOSITS	BALANCE
1 02/12/04			1,644.11	1,644.11
2 02/12/04	300.00			1,344.11
3 02/26/04		0.26		1,344.37
4 03/04/04	1,000.00			344.37
5 03/21/04	80.00			264.37

TALK WITH US ABOUT A HOME LOAN TOO!

THIS PASSBOOK IS YOUR RECEIPT-PRESENT IT FOR EACH TRANSACTION

Change of Address

April 11, 2004

Commissioner for Patents
United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

via Fax: to (703) 308-6916, Attn: Office of Petitions
Attn: Office of Petitions

Re: my Non-Provisional Utility Patent Application #09/849,582

Sole Inventor: David Andrew D'Zmura (pro-se independent inventor)

Sole Applicant: David Andrew D'Zmura (pro-se independent inventor)

Sole Owner: David Andrew D'Zmura (pro-se independent inventor)

Filing Date: May 5, 2001

Title: Method of Determining Zodiac Signs

Attorney/Agent: None

Dear Madam or Sir:

Immediately effective, and concurrent thereto, please enter this Change of Address on my above referenced patent application, #09/849,582, as, when, and presuming, said application is revived, and hence moves to formal issuance as utility patent.

Please enter and utilize, for all further correspondence at the present time, and for official address on patent formalities:

Mr. David Andrew D'Zmura
(my personal, my-use-only, P.O.Box)

P.O. Box 621

Indio, CA 92201.

Thank you for entering this Change of Address forthwith.

Sincerely,

David Andrew D'Zmura

David Andrew D'Zmura
enc. proof of mail tampered/opened from U.S.P.T.O. to me at my P.O.Box 2541
proof (receipt and new service application, my personal, my-use-only, P.O.Box 621.

Organization UNITED STATES PATENT AND TRADEMARK OFFICE

PO. Box 1450

Alexandria, VA. 22313-1450

If Undeliverable Return In Ten Days

Official Business

Penalty For Private Use, \$300

CP4-3C23

Bldg./Room 707

U.S. OFFICIAL MAIL

Penalty	For
Private	Use \$300
PB Meter	*
1249720 U.S. POSTAGE	



U.S. POSTAL SERVICE
U.S. POSTAGE
1249720 U.S. POSTAGE
88
FEB 13 1994
U.S. POSTAL SERVICE
U.S. POSTAGE

RECEIVED UNSEALED AT
PALM DESERT, CA 92260

David Andrew D'Zmura
P.O. Box 2541
PALM DESERT CA 92261

RECEIVED UNSEALED AT
PALM DESERT, CA 92260

Application Cards

Tear off this page, fill it out, and turn it in to your post office.

Application for Post Office Box or Caller Service - Part 1

Customer: Complete items 1, 3-6, 14-16, and 18-19

1. Name(s) to which box number is assigned

Mr. David Andrew D'Zmura ONLY

3. Name of person applying, title (if representing an organization), and name of organization (If different from item 1)

~~Mr. David Andrew D'Zmura~~

5. Address (Number, street, apt./ste. no., city, state, and ZIP Code).

When address changes, cross out address here and put new address on back.

82-485 11th Avenue
Indio, CA 92201

7. Date application received

03/12/2004

8. Box number

3479022

9. Date and place of residence

10. Date of birth

11. Photo of applicant

12. Signature of applicant

13. Signature of witness

14. List name(s) and age(s) of minors or names of other persons receiving mail in individual box. Other persons must present two forms of valid ID. If applicant is a firm, name each member receiving mail. Each member must have verifiable ID upon request. (Continue on reverse side).

15. Signature of applicant (Same as item 3) I agree to comply with all postal rules regarding post office box or caller service.

► *David Andrew D'Zmura*

Warning: The furnishing of false or misleading information on this form or omission of material information may result in criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties). (18 U.S.C. 1001)

PS Form 1093, August 2001 (Page 1 of 2)

Application for Post Office Box or Caller Service - Part 2

Special Orders

16. Postmaster: The following named persons or representatives of the organization listed below are authorized to accept mail addressed to this (these) post office box(es) or caller number(s). All names listed must have verifiable ID. (Continue on reverse side).

a. Name(s) of applicant(s) (Same as item 3)

myself only, Mr. David Andrew D'Zmura

b. Name of box customer (Same as item 1)

Mr. David Andrew D'Zmura

c. Other authorized representative

none

d. Other authorized representative

none

17. Box or caller number to which no card is posted

18. Will this box be used for Express Mail reshipment? (Check one)

a. Yes b. No

Warning: The furnishing of false or misleading information on this form or omission of material information may result in criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties). (18 U.S.C. 1001)

Customer note: The Postal Service may consider it valid evidence that a person is authorized to remove mail from the box if that person possesses a key or combination to the box.

Use a separate form for each box number or consecutive group of numbers, and type of service. File part 2 by box or caller number.

19. Signature of applicant (Same as item 3) I agree to comply with all postal rules regarding post office box or caller service.

► *David Andrew D'Zmura*

PS Form 1093, August 2001 (Page 2 of 2)

INDIO MAIN PO
INDIO, California
92201-9998
0567760201-0096
(800)275-8777

02:46:41 PM

04/12/2004 Sales Receipt

Product Description	Sale Qty	Unit Price	Final Price
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P.O.Box	621	New Service	
Period: 6 Months		04/01/2004-09/30/2004	\$24.00

Service Fee		\$24.00
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Total: \$24.00

Paid by:
Cash \$50.00
Change Due: -\$26.00

Bill #: 1000401049704
Clerk: 27

All sales final on stamps and postage.
Refunds for guaranteed services only.
Thank you for your business.
Customer Copy